

**FILED**

**OCT 15 2012**

UNITED STATES DISTRICT COURT

NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION  
**THOMAS G. BRUTON**  
**CLERK, U.S. DISTRICT COURT**

VENETA DIMITROVA,

Plaintiff,

v.

ADDUS HEALTHCARE, INC.,

Defendant.

]

]

12cv8263

Judge Joan B. Gottschall

Magistrate Maria Valdez

]

**COMPLAINT**

**COUNT I—TITLE VII, CIVIL RIGHTS ACT OF 1964**

1. Plaintiff is a resident of Illinois, domiciled in Chicago, Cook County, Illinois.
2. Defendant Addus HealthCare Inc. is a corporation with its principal place of business at 2401 S. Plum Grove Road, Palatine, Illinois 60067, which conducts business in Cook County, Illinois.
3. Plaintiff was employed in this judicial district by Defendant, as Office Assistant.
4. This court has jurisdiction over this case pursuant to 28 U.S.C. section 1331 because this cause arises under the laws of the United States.
5. Venue is proper in this District pursuant to 28 U.S.C. section 1391(b)(2) in that a substantial part of the events giving rise to this claim occurred in this District.
6. Plaintiff commenced her employment by Defendant in or about November, 2005.
7. Plaintiff is female and was born in Bulgaria, and is a naturalized U.S. Citizen.
8. Commencing in 2005 Plaintiff was subjected to different terms and conditions of employment than her non-Bulgarian counterparts and male counterparts, including but not limited to receiving unjustified criticism and discipline, being

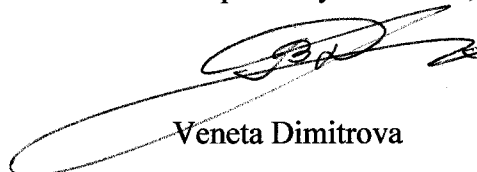
physically assaulted, having responsibilities reduced, being denied raises and promotions, and being terminated on June 8, 2012.

9. Defendant discriminated against Plaintiff because of her national origin and ethnicity, Bulgarian , and because of her gender, female, in violation of Title VII of the Civil Rights Act of 1964, as amended.
10. As a direct and proximate result of Defendant's conduct, Plaintiff has suffered injuries, including loss of compensation, loss of commissions, loss of fringe benefits, loss of earning potential, loss of reputation, embarrassment, humiliation, betrayal, shame, inconvenience, loss of self-esteem and mental anguish, and other incidental and consequential damages, including court costs, attorney fees and expenses of litigation.
11. Plaintiff demands trial by a jury of twelve on all issues so triable.
12. Plaintiff has received and attached a Notice of Suit Rights and filed this Complaint within 90 days of its receipt.

WHEREFORE, Plaintiff prays judgment against Defendant in such amount in excess of \$300,000 as may compensate her for her injuries as alleged above and for such additional or different relief as may be necessary to effect the remedial purposes of the statute under which this suit is bought.

Respectfully submitted,

10.15.2012



Veneta Dimitrova

Veneta Dimitrova  
P.O. Box 256561  
Chicago IL 60625  
773 462 2630

EEOC Form 161 (11/09)

## U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

## DISMISSAL AND NOTICE OF RIGHTS

To: **Veneta I. Dimitrova**  
**P O Box 256561**  
**Chicago, IL 60625**

From: **Chicago District Office**  
**500 West Madison St**  
**Suite 2000**  
**Chicago, IL 60661**

☐

On behalf of person(s) aggrieved whose identity is  
**CONFIDENTIAL (29 CFR §1601.7(a))**

Telephone No.

EEOC Charge No.

EEOC Representative

**Zelma Gonzalez,**  
**Investigator Support Asst**

(312) 869-8129

440-2012-03428

## THE EEOC IS CLOSING ITS FILE ON THIS CHARGE FOR THE FOLLOWING REASON:

- ☐ The facts alleged in the charge fail to state a claim under any of the statutes enforced by the EEOC.
- ☐ Your allegations did not involve a disability as defined by the Americans With Disabilities Act.
- ☐ The Respondent employs less than the required number of employees or is not otherwise covered by the statutes.
- ☐ Your charge was not timely filed with EEOC; in other words, you waited too long after the date(s) of the alleged discrimination to file your charge
- ☒ The EEOC issues the following determination: Based upon its investigation, the EEOC is unable to conclude that the information obtained establishes violations of the statutes. This does not certify that the respondent is in compliance with the statutes. No finding is made as to any other issues that might be construed as having been raised by this charge.
- ☐ The EEOC has adopted the findings of the state or local fair employment practices agency that investigated this charge.
- ☐ Other (briefly state)

## - NOTICE OF SUIT RIGHTS -

(See the additional information attached to this form.)

**Title VII, the Americans with Disabilities Act, the Genetic Information Nondiscrimination Act, or the Age Discrimination in Employment Act:** This will be the only notice of dismissal and of your right to sue that we will send you. You may file a lawsuit against the respondent(s) under federal law based on this charge in federal or state court. Your lawsuit must be filed **WITHIN 90 DAYS** of your receipt of this notice; or your right to sue based on this charge will be lost. (The time limit for filing suit based on a claim under state law may be different.)

**Equal Pay Act (EPA):** EPA suits must be filed in federal or state court within 2 years (3 years for willful violations) of the alleged EPA underpayment. This means that **backpay due for any violations that occurred more than 2 years (3 years) before you file suit may not be collectible.**

On behalf of the Commission


*John P. Rowe*  
**John P. Rowe,**  
**District Director**

7-18-2012

(Date Mailed)

Enclosures(s)

cc: **ADDUS HEALTHCARE INC**

<b>CHARGE OF DISCRIMINATION</b> This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.		Charge Presented To:      Agency(ies) Charge No(s): <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> FEPA  <input checked="" type="checkbox"/> EEOC         </div> <div style="text-align: right;"> <b>AMENDED</b>  <b>440-2012-03428</b> </div> </div>	
<b>Illinois Department Of Human Rights</b> and EEOC <small>State or local Agency, if any</small>			
Name (indicate Mr., Ms., Mrs.) <b>Ms. Veneta I. Dimitrova</b>		Home Phone (Incl. Area Code)	Date of Birth <b>04-27-1954</b>
Street Address <b>P O Box 256561</b>		City, State and ZIP Code <b>Chicago, IL 60625</b>	
Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)			
Name <b>ADDUS HEALTHCARE INC</b>		No. Employees, Members <b>500 or More</b>	Phone No. (Include Area Code) <b>(312) 663-4647</b>
Street Address <b>14 E. Jackson Blvd., Suite 902</b>		City, State and ZIP Code <b>Chicago, IL 60604</b>	
Name		No. Employees, Members <b>JUL 9 6 2012</b>	Phone No. (Include Area Code)
Street Address		City, State and ZIP Code <b>CHICAGO DISTRICT OFFICE</b>	
DISCRIMINATION BASED ON (Check appropriate box(es).) <div style="display: flex; flex-wrap: wrap;"> <div style="margin-right: 10px;"><input checked="" type="checkbox"/> RACE</div> <div style="margin-right: 10px;"><input checked="" type="checkbox"/> COLOR</div> <div style="margin-right: 10px;"><input checked="" type="checkbox"/> SEX</div> <div style="margin-right: 10px;"><input checked="" type="checkbox"/> RELIGION</div> <div style="margin-right: 10px;"><input checked="" type="checkbox"/> NATIONAL ORIGIN</div> <div style="margin-right: 10px;"><input checked="" type="checkbox"/> RETALIATION</div> <div style="margin-right: 10px;"><input checked="" type="checkbox"/> AGE</div> <div style="margin-right: 10px;"><input type="checkbox"/> DISABILITY</div> <div style="margin-right: 10px;"><input type="checkbox"/> GENETIC INFORMATION</div> <div><input type="checkbox"/> OTHER (Specify)</div> </div>		DATE(S) DISCRIMINATION TOOK PLACE Earliest      Latest <div style="text-align: right;"><b>06-08-2012</b></div> <div style="text-align: right;"><input type="checkbox"/> CONTINUING ACTION</div>	
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)):  <p><b>I began my employment with Respondent in or around November 2005. My current position is Clerk/Office Assistant. During my employment, I have been severely harassed, verbally abused, bullied, ridiculed, and mistreated constantly. I complained of the harassment to Respondent and I filed Charges of Discrimination against Respondent. Subsequently, I have been furthered severely harassed and mistreated and I have been disciplined. I was discharged for filing the previous charge in retaliation.</b></p> <p><b>I believe I have been discriminated against because of my race, White; my sex, female; my religion, Christian; my national origin, Bulgarian; my color, light-skinned and in retaliation for engaging in protected activity, in violation of Title VII of the Civil Rights Act of 1964, as amended. I also believe I have been discriminated against because of my age, 58 (DOB: April 27, 1954), and in retaliation for engaging in protected activity, in violation of the Age Discrimination in Employment Act of 1967, as amended.</b></p>			
I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.  I declare under penalty of perjury that the above is true and correct.		NOTARY - When necessary for State and Local Agency Requirements  I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. SIGNATURE OF COMPLAINANT  SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (month, day, year)	
07.06.2012 (V.D.) Date		 Charging Party Signature	